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ALLAIRE (Depositor's name) (Segnature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/625,097	07/22/2003	Brian Teixeira	PM0253	8768

TITLE OF INVENTION: AUTOMATED DYNAMIC PRESSURE-RESPONSIVE DISPENSING SYSTEMS, AND ASSOCIATED METHODS AND COMPUTER PROGRAM PRODUCTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUI:		
nonprovisional	NO	\$1400	\$300	\$0 08/22/2007	NNGUYEN2 00000125	08/22/2007 502665 10625097		
EXAMINER		ART UNIT	CLASS-SUBCLASS		1400.00 DA			
TRAN, KHOI H		3651	700-239000	01 FC:1501 02 FC:1504	300.00 DA			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NO (A) NAME OF ASSIGNEE  Medi-Physics, Indication of "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for IT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  PRINCE LAW, MJ					
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Authorized Signature	$\langle \chi \gamma \rangle \langle \chi \gamma \rangle V_{ij}$	7/		4	g. 22, 20			

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